

Wisconsin Department of Corrections

Governor Scott Walker | Secretary Jon E. Litscher

Office of Detention Facilities

December 28, 2017

Sheriff Mark Westen Langlade County Sheriff's Office 840 Clermont Street Antigo, WI 54409

Re: 2017 Jail Inspection

Dear Sheriff Westen:

Pursuant to Wisconsin Statute §301.37(3), an inspection of the Langlade County Jail was conducted on October 17th, 2017. The inspection compared the facility to the Department of Corrections Administrative Code Chapter DOC 350, applicable State Statutes, and best correctional practices. The process included a review of records, dialogue with staff and inmates, and a walkthrough of the building to assess the safety, sanitation, adequacy, and fitness of the facility. This correspondence will summarize the findings of the inspection.

SUMMARY OF FACILITY

The Langlade County Jail was constructed in 2000 and consists of podular-remote and dormitory style housing units. The facility has a maximum rated capacity of 119 adult detainees and is not approved to hold juvenile offenders. There were 86 inmates at the jail on the date of the inspection.

INMATE RESOURCES

- ➤ <u>EDUCATION</u> General Educational Development (GED)/High School Equivalency Diploma (HSED) are offered by Northcentral Technical College on a weekly basis.
- > <u>SUPPORT GROUPS</u> Alcoholics Anonymous (AA) and Breaking Barriers are available each week.
- ➤ <u>LIFE SKILLS PROGRAMMING</u> There are no in-house life skills programs.
- ➤ <u>RELIGIOUS SERVICES</u> A nondenominational service and Bible Study are held each week (inmates are also afforded individual consultations).
- ➤ <u>VISITATION</u> Inmates are generally afforded two 20-minute visits each week. Visits are conducted through non-contact booths.

- <u>COMMISSARY</u> Canteen is provided by CBM Managed Services and inmates are generally allowed to order weekly.
- **RECREATION** Recreation is limited to dayroom activities.
- > **READING MATERIALS** Inmates are afforded access to reading materials on a weekly basis.



The following is a list of changes since last year's inspection:

- Revised the due process forms to include the 24-hour waiver.
- Additional step added to the grievance process.
- > Completed security camera and jail control upgrades.
- ➤ Contracted with a new commissary provider (CBM Managed Services).
- ➤ Increased nursing coverage (35 hours/week), physician's assistant hours (two hours/week), and mental health services (eight hours/week).
- Developed a command structure within the jail (one lieutenant and four sergeants).
- ➤ Added two full-time correctional officers.
- ➤ Designated a PREA Coordinator and initiated a training program.
- > Designated two program officer positions.
- > Fostered relationship between the contracted mental health provider and external mental health agencies to enhance reintegration efforts.



The following is a list of goals for the upcoming year:

- Convert the policy and procedure manual to Lexipol.
- > Implement a tablet system in all dormitories.
- > Develop inmate release packets.
- ➤ Implement a new jail management system (Superion).
- Develop an inmate vocational training program in conjunction with the local technical college.

SUMMARY OF INSPECTION

ODF Specialist Heidi Mellenberger and I met with Langlade County administrative, security, food service, and healthcare personnel to conduct the annual inspection. The site visit included a review of records, dialogue with staff and inmates, and a walkthrough of the building to assess the safety, sanitation, adequacy, and fitness of the facility. The attached checklist details our findings as they relate to the Department of Corrections Administrative Code Chapter DOC 350 and applicable State Statutes.

In summary, the overall appearance of the jail was in satisfactory condition. There were no significant signs of graffiti or property defacing. A spot check of facility conditions and mechanical devices revealed the following issues:

- > Staff and inmates reported the telephones were inoperable (addressed subsequent to the inspection).
- > Dried toilet paper was stuck along a wall in housing unit MH (addressed subsequent to the inspection).
- The floor in housing unit AD was in need of cleaning (addressed subsequent to the inspection).
- ➤ The floors of the kitchen cooler and dry storage were in need of cleaning (addressed subsequent to the inspection).
- ➤ Inmates reported the washbasins in cells NS-4 and F-2 were not working (addressed subsequent to the inspection).
- The ceilings of H1, H3, and H4 were in need of cleaning (addressed subsequent to the inspection).
- > There appears to be a leak in the ceiling outside of the laundry area in the hallway.
- > Inmates reported the showers in H3 and H4 were leaking into the adjacent bathroom area.
- Flies were observed in the showers of MH, SM, NS, PP, and F units.
- Non-security screws were utilized to install the outlet covers for the kiosks. Additionally, it is recommended security caulk be applied along the conduit for the kiosks.

Detainee feedback regarding conditions of confinement was mixed. Common-themed complaints included the housing unit telephones, a lack of games/dayroom activities, holes in inmate socks, and flies in the showers. Detainee feedback regarding staff supervision was mostly positive. Our observations during the walkthrough revealed cordial and professional interactions between employees and inmates. Staff are to be commended for the positive feedback.



The following violations were noted during this year's inspection process:

- Administrative Code DOC 350.03(6) defines what a "dayroom" is and how it can be used. Contrary to the code, an inmate was observed sleeping on a dayroom floor (H1) during the inspection. Moreover, DOC 350.06(6)(c) requires a detention strength bed for each occupant of a dormitory. As was discussed during the inspection closeout, there are also minimum space requirements for each occupant of a dormitory.
- Administrative Code DOC 350.13(5) requires a health appraisal to be completed within 14 days of being booked into the facility. It was reported and a spot check of records revealed not all appraisals were completed within the 14-day requirement during this inspection period. It should be noted an H&P log is now being utilized to track the completion and timeliness of appraisals.
- Administrative Codes DOC 350.16(7) and DOC 350.16(8) require medications administered to or refused by an inmate shall be documented. A spot check of the medication administration records revealed noncompliance, as multiple unexplained gaps were observed.
- Administrative Codes DOC 350.18(1)(a) and 350.18(1)(b) require that all inmates are personally observed by security staff at staggered intervals not to exceed 60 minutes in length (15 minutes for those inmates on a suicide watch). A spot check of records revealed noncompliance, as multiple overages were observed for both types of wellness checks. Also of concern, is the completion of suicide watch checks at exact intervals (e.g. 2:00, 2:15, 2:30, 2:45, 3:00, etc.).

- Administrative Code DOC 350.18(8) requires all jail keys to be stored in a secure area.
- Administrative Code DOC 350.24(3) requires various procedural steps to ensure an inmate's due process when imposing a major discipline. A spot check of records revealed noncompliance with the following issues noted:
 - Contrary to DOC 350.24(3)(c), a due process hearing was held within 24 hours of the inmate being served notice (without the inmate waiving this time period).
 - Contrary to DOC 350.24(3)(d)(1), a due process hearing was facilitated by a staff member who was involved in the incident.
 - Contrary to DOC 350.24(3)(e), the inmate disciplinary hearing form states "a waiver constitutes an admission of guilt to the alleged violation."

Also of concern, a spot check of minor disciplinary reports revealed some inmates actually received major dispositions. As was discussed during the inspection closeout, administration is encouraged to utilize separate due process forms for both minor and major disciplines (which mirror the respective procedural requirements of DOC 350.24).

MISCELLANEOUS

The following miscellaneous issues were also noted during this inspection process:

- Monthly Fire Safety Inspections − A spot check of records revealed limited compliance, as only fire safety equipment is getting checked on a monthly basis (not the facility itself). Administration is encouraged to broaden the scope of the inspections (a sample form was provided subsequent to the inspection).
- ✓ <u>Suicide Watch Placements</u> Administrative Code DOC 350.17(10) requires certain documentation regarding the actions and decisions of an inmate on a suicide watch. A spot check of records verified general compliance; however, not all of the aforementioned standards were documented in the reports reviewed (sample suicide watch placement forms were provided subsequent to the inspection).
- ✓ <u>Food Storage</u> A spot check of food storage verified general compliance; however, not all food products were properly dated.
- ✓ <u>Facility Searches/Shakedowns</u> A spot check of records verified general compliance; however, not all housing units are getting searched on a basis.
- ☑ <u>Classification</u> A spot check of classification records verified general compliance; however, the following two issues were noted: 1) a maximum-security inmate and medium-security inmate were being housed together in the same cell; and 2) an individual had been incarcerated for over a month and had not yet received their primary classification. *Staff addressed both issues during the inspection*.
- ✓ <u>Health Transfer Summary Forms</u> A spot check of records verified general compliance; however, section #9 was not consistently filled out. Additionally, administration and medical are encouraged to review the practice of how HTS forms are completed when the nurse is not onsite.

<u>Juveniles</u> – A juvenile was inadvertently held in a receiving cell for a short period during this last year (the Langlade County Jail is not authorized to hold juveniles). While supervisory staff reviewed the incident and signage was posted at facility entrances prohibiting the practice, no additional training was provided to correctional officers. As was discussed during the inspection closeout, administration is encouraged to review the practice of processing juveniles/unidentified new arrestees with jail staff.

APPROVAL

The Langlade County Jail is approved to hold adult detainees with a rated capacity of 119. This approval is contingent upon correction of the noted violations and the continued compliance with Chapter DOC 350 and applicable State Statutes. I would like to thank your staff for their assistance and cooperation during the inspection. All of the requested documents were well prepared and organized.

Please do not hesitate to contact our office should you have any questions regarding this inspection report.

Professionally,

Nathan White, Inspector

DEPARTMENT OF CORRECTIONS

Cc: John Schunke, Chief Deputy

Donald Bergbower, Jail Administrator

Robbin Dailey, Lieutenant

Kristi Dietz, ODF

Heidi Mellenberger, ODF

File

CHAPTER DOC 350 INSPECTION DOCUMENT

COUNTY: Langlade			DATE : 10/17/17				
		INM	ATE HOUSING AND CLASSIFICA	1017	J		
			or substantially remodeled on or after S	Septer	nber 1, 2014, double cells shall have a		
floor a	rea of at least 25 square feet of un	encur	nbered space per occupant.				
COMP	LIANCE	VE	RIFICATION				
Meets standard			Policy and procedure manual review		Previous compliance documented		
	Needs improvement		Sample of facility records reviewed		Other (specify):		
	Non-compliant		Sight confirmation by inspector				
	Not reviewed		Verbal confirmation by facility staff				
Comme	ents:						
DOC 2	E0.00 (2) (4) DOC 250.07 (4) In in	!la 4h.a	t and a material an archatomtically named	اماما ا	wier to Contembor 4, 2044, to be used for		
			a of at least 70 square feet. NOTE: ODF		prior to September 1, 2014, to be used for gnizes current code does not reflect the		
			1990, a cell shall have a floor area of at l				
COMP	LIANCE	VE	RIFICATION				
\square	Meets standard		Policy and procedure manual review	\boxtimes	Previous compliance documented		
Ħ	Needs improvement		Sample of facility records reviewed		Other (specify):		
一百	Non-compliant		Sight confirmation by inspector		(-1 y)		
一百	Not reviewed		Verbal confirmation by facility staff				
Comme	ents.						
00111111	o.no.						
DOC 3	50.20 Double celling. If approve	d by th	e department, the jail shall have policies	s and i	procedures relating to double celling		
		_		_			
			shall determine jointly the adequate staff nd security of the jail staff and inmates \		eeds, including support staff and services		
					and the sheriff and shall be filed with the		
depart	ment. The written joint determina	tion sl	nall remain in effect until rescinded or ar	nende	d by mutual written agreement of the		
_		s ade	quate staff as agreed upon by the county	/ boar	d and sheriff, double celling may not		
occur.							
The wr			ard and Sheriff is on file with the depart	ment a	and contains the following elements:		
•	The County Board and Sheriff agree						
	The staffing levels include security The staffing pattern is detailed in t		health care staff, support and service staff a	and ad	ministrative staff		
			ves of the County Board and the Sheriff				
COMP	LIANCE	VE	RIFICATION				
	Meets standard	\geq	Policy and procedure manual review	\boxtimes	Previous compliance documented		
	Needs improvement		Sample of facility records reviewed		Other (specify):		
	Non-compliant		Sight confirmation by inspector				
	Not reviewed	$\overline{\mathbb{X}}$	Verbal confirmation by facility staff				
Comme	ents: A staffing agreement was	sign	ed on 9/10/08.				

Office of Detention Facilities DOC-2744 (4/2015)

DOC 350.20 (2) Inmates housed in the same cell shall have the same custody classification and be properly segregated as required					
under s. 302.36, Stats.	i tile Same Ce	en shan have the same custody class	incation and	be property segregated as required	
COMPLIANCE	VEF	RIFICATION			
Meets standard	\boxtimes	Policy and procedure manual review	Pr	evious compliance documented	
Needs improvement	\boxtimes	Sample of facility records reviewed	Ot	ther (specify):	
Non-compliant		Sight confirmation by inspector			
Not reviewed	\boxtimes	Verbal confirmation by facility staff			
•		records verified general compl housed together in the same cell		ever, a maximum-security inmate	
and medium-security inmate v	vere being	noused together in the same cen	on the date	e of the inspection.	
DOC 350.20 (3) For male and fema shall be maintained for single occ		reas, at least one cell or 15% of the j	ail's total nur	mber of cells, whichever is greater,	
COMPLIANCE	VEF	RIFICATION			
Meets standard		Policy and procedure manual review	⊠ Pr	evious compliance documented	
Needs improvement		Sample of facility records reviewed		ther (specify):	
Non-compliant		Sight confirmation by inspector		пот (ороспу).	
Not reviewed		Verbal confirmation by facility staff			
		Torsai commination by racinty clair			
Comments:					
DOC 350.20 (4) Receiving cells ma	ay not be use	ed for double occupancy.			
COMPLIANCE	VEF	RIFICATION			
Meets standard	\boxtimes	Policy and procedure manual review	Pr	evious compliance documented	
Needs improvement	\boxtimes	Sample of facility records reviewed	Ot	ther (specify):	
Non-compliant	X	Sight confirmation by inspector	_		
Not reviewed		Verbal confirmation by facility staff			
Comments:					
maintain an objective prisoner cla eligibility criteria for prisoner parti have policies and procedures rela DOC 350.21 (1) Description of the	ssification sy cipation in a ting to classi objective pr		status and h s and commu	ousing assignment, and develop unity service projects. The jail shall ication and training of staff authorized	
DOC 350.21 (2) Eligibility criteria t	or prisoner p	participation in available work assign	ments, progr	rams and community service projects.	
DOC 350.21 (3) Review of prisone	r classification	on decisions.			
 The jail has implemented an objective classification system based on point additive formula or decision tree forced choice or similar formalized mechanism for housing determination. A written policy is provided to all correctional staff detailing classification process. Policy clearly identifies personnel authorized to classify inmate housing assignments. Personnel assigned to complete inmate classification assignment receive formal training. A process is in place for supervising personnel to complete a secondary review of reclassification and appeals. Sufficient housing exists to meet classification guidelines to male and female inmates. Inmates housed in the same cell shall have the same security classification and be properly segregated as required in s. 302.36 Stats. 					
COMPLIANCE	VEF	RIFICATION			
Meets standard	\boxtimes	Policy and procedure manual review	Pr	evious compliance documented	
Needs improvement		Sample of facility records reviewed		ther (specify):	
Non-compliant		Sight confirmation by inspector			
Not reviewed	\boxtimes				
Comments: The jail utilizes a decision-tree system for an objective classification instrument (completed records were observed). All staff have been trained on this process and there is a designated officer assigned to oversee classifications. A spot check of records verified general compliance; however, the following two issues were noted: 1) a maximum-security inmate and medium-security inmate were being housed together in the same cell; and 2) an					

DOC-2744 (4/2015)

individual had been incarcerated for over a month and had not yet received their primary classification. Staf addressed both issues during the inspection.

SAFETY AND SECURITY PRACTICES

DOC 350.18 Security. The jail shall have policies and procedures relating to jail security.

- Portable communications and alarm systems are in good working condition
- Intercom and emergency notification devices are in good working order

DOC 350.18 (1) Inmate supervision. The jail shall have a system providing for well-being checks of inmates. Policies and procedures shall provide that all inmates are personally observed by jail security staff at staggered intervals not to exceed the following: (a) 60 minutes (b) 15 minutes for inmates housed on suicide watch.

- All inmates are personally observed during each physical inspection.
- In housing units of multiple cells, officers are encouraged to complete physical inspections from within the housing unit.

•	in nousing units of multiple ce	iis, oiliceis a	re encouraged to complete physical inspe	cuons	from within the nousing unit.
	50.18 (2) Supplemental obser vations.	vation. A vi	deo monitoring system may be used to	supp	element but not replace personal
ODSEL	vations.				
	50.18 (3) Documentation. Eac				
COMP	PLIANCE	VERI	FICATION		
	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed	\boxtimes	Other (specify):
$\underline{\hspace{0.1cm}oldsymbol{\boxtimes}}$	Non-compliant		Sight confirmation by inspector		
Ш	Not reviewed		Verbal confirmation by facility staff		
					ges were observed for both types of
welln	ess checks. Also of conce	ern, is the	completion of suicide watch checl	ks at	exact intervals
DOC 3	50.18 (4) Inmate counts. Des	cription of the	ne system for physically counting inma	ates. I	Formal counts shall be completed and
	•	• • • • • • • • • • • • • • • • • • • •	minimum of one count per shift.		
COMP	PLIANCE	VERI	FICATION		
\boxtimes	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Comm	ents: A spot check of record	ds verified	compliance.		
DOC 3	50.18 (5) Security inspections	. Description	ons of procedures for conducting and o	docun	nenting facility and area searches.
	Facility and area searches are	completed a	and documented		
	•	•			
	LIANCE		FICATION		
	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
<u> </u>	Non-compliant	<u> </u>	Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Comm		ds verified	general compliance; however, no	t all h	nousing units are getting searched on
a	basis.				
		escriptions (of procedures for conducting and docu	ımenti	ing inmate pat down, strip and body cavity
searcl	nes.				
COMP	PLIANCE	VERI	FICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		

Comments: A spot check of records verified staff received annual strip search training in accordance with WI Stat. §968.255.

DOC 350.18 (7) Door and lock inspections. secure perimeter of the facility are in good v			
 The remote security controls of doors All manufacturing doors, locks and rel The jail staff demonstrate a proficience 		ses.	
COMPLIANCE	ERIFICATION		
Meets standard	Policy and procedure manual revie	ew	Previous compliance documented
Needs improvement	Sample of facility records reviewed	d E	Other (specify):
Non-compliant	Sight confirmation by inspector		
Not reviewed	Verbal confirmation by facility staff		
Comments: A spot check of records veri	ed compliance.		
DOC 350.18 (8) Key control. Control and us	e of jail keys, including all of the foll	owing:	
(a) All issued keys shall be inventoried ar(b) All keys shall be stored in a secure ar(c) Inmate are not permitted to handle or	a and accessible in the event of an em	ergency	
	ERIFICATION		
Meets standard	Policy and procedure manual review	w	Previous compliance documented
Needs improvement	Sample of facility records reviewed		Other (specify):
Non-compliant	Sight confirmation by inspector		
Not reviewed	Verbal confirmation by facility staff		
Comments:			
DOC 350.18 (9) Weapons control. Introduce electronic control devices or other related s			
	ERIFICATION		
Meets standard	Policy and procedure manual reviews)\A/	Previous compliance documented
Needs improvement	Sample of facility records reviewed		' 1
Non-compliant	Sight confirmation by inspector		Other (specify):
Not reviewed	Verbal confirmation by facility staff		
Comments: Secure lockers are available			
DOC 350.18 (10) Tools and sharps control. the facility. • Documentation of the control and investigations.		ventory, sto	rage and use of tools and sharps within
COMPLIANCE	ERIFICATION		
Meets standard	Policy and procedure manual reviews	ew	Previous compliance documented
Needs improvement	Sample of facility records reviewed		Other (specify):
Non-compliant	Sight confirmation by inspector		1 Caron (opcony).
Not reviewed	Verbal confirmation by facility staff		
Comments:	- y - 2.22. 35 Since y dominy drain		

DOC-2744 (4/2015)

DOC 350.19 Fire Safety. The jail shall have policies and procedures relating to fire safety.

DOC 350.19 (2) Each jail shall develop a fire safety policy in accordance with local fire department recommendations that addresses all of the following:

- Local fire department inspection requirements under sub. (5).
- Fire protection equipment location and maintenance. Each jail shall have and shall properly maintain fire alarms, smoke and thermal detectors, fire extinguishers and self-contained breathing apparatuses which operate for at least 30 minutes.
 - Fire extinguishers are properly maintained with recorded time and date of inspection.
 - Fire extinguishers are properly placed, secured and easily accessible to staff.
 - A fire extinguisher suitable for grease fires is provided in the kitchen.
 - Jail staff can demonstrate proficiency in the use of fire protection equipment.
- Training of staff in equipment use and the evacuation of inmates
 - Staff training is documented.

Needs improvement

Non-compliant

Not reviewed

5/26/17, and 9/7/17.

d) A written evacuation planJail staff can articulate or del	emonstrate the evacuation routes and policies of the	jail.	
COMPLIANCE	VERIFICATION		
Meets standard	Policy and procedure manual review	Previous compliance documented	
Needs improvement	Sample of facility records reviewed	Other (specify):	
Non-compliant	Sight confirmation by inspector		
Not reviewed	Verbal confirmation by facility staff		
pack). A spot check of fire extingu	SCBA's were observed in the facility (staff uisher tags verified they are being serviced	regularly.	
DOC 350.19 (3) The evacuation route d place for jail staff in the jail.	leveloped as part of the evacuation plan under su	ub. (2)(d) shall be posted in a conspicuous	
COMPLIANCE	VERIFICATION		
Meets standard	Policy and procedure manual review	Previous compliance documented	
Needs improvement	Sample of facility records reviewed	Other (specify):	
Non-compliant	Sight confirmation by inspector		
Not reviewed Verbal confirmation by facility staff			
Comments: Evacuation routes were			
DOC 350.19 (4) Fire safety evacuation a months. Each practice or simulation sl	and other procedures shall be practiced or simul hall be documented.	lated by all jail staff at least once every 12	
COMPLIANCE	VERIFICATION		
Meets standard	Policy and procedure manual review	Previous compliance documented	
Needs improvement	Sample of facility records reviewed	Other (specify):	
Non-compliant	Sight confirmation by inspector		
Not reviewed	Verbal confirmation by facility staff		
Comments: A spot check of training	records verified compliance.		
DOC 350.19 (5) The facility shall be ins maintained.	spected by the local fire department at least once	every 12 months and a record thereof shall be	
 The fire inspection report support 	pports that the facility conforms to applicable fire saf	ety codes.	
COMPLIANCE	VERIFICATION		
Meets standard	Policy and procedure manual review	Previous compliance documented	

Sample of facility records reviewed

Verbal confirmation by facility staff Comments: Documentation from the Antigo Fire Department verified compliance with inspections completed on 8/24/16,

Sight confirmation by inspector

Other (specify):

DOC 350.19 (6) There shall be monthly inspections shall be documented.	ections of the facility to ensure compliance with s	safety and fire prevention standards.
COMPLIANCE V	ERIFICATION	
Meets standard	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
Non-compliant [Sight confirmation by inspector	
Not reviewed	Verbal confirmation by facility staff	
	vealed limited compliance, as only SCBA e facility itself). Administration is encoured subsequent to the inspection).	
DOC 350.22 (1) Jail staff may use physical for prevent death or bodily injury to the staff me	e policies and procedures for the use of force. orce against an inmate only if force is necessary mber, the inmate or someone else, unlawful damamount of force reasonably necessary to achieve n.	age to property, or the escape of an
COMPLIANCE V	ERIFICATION	
Meets standard	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
Non-compliant [Sight confirmation by inspector	
Not reviewed	Verbal confirmation by facility staff	
Comments:	sed force to control an inmate or inmates shall s	
submitted by the end of the shift, unless othSupervisory review is conducted a		
	ERIFICATION	
	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
Non-compliant	Sight confirmation by inspector	
	∀erbal confirmation by facility staff	
Comments: As was discussed during the reviews (a sample UOF form was provi	inspection closeout, administration is enco ded subsequent to the inspection).	uraged to document all supervisory
	have policies and procedures governing the use used as punishment and are not applied longer the	
• Inventories are conducted and door DOC 350.23 (2) When an inmate is mechanic the shift, unless otherwise authorized by the use and corresponding wellness checks.	cumented. cally restrained for non-routine purposes, a writte sheriff or sheriff's designee. Documentation she	en report must be completed by the end of all include the reason for use, duration of
 Supervisory review is conducted a 	nd documented	
COMPLIANCE V	ERIFICATION	
	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
Non-compliant	Sight confirmation by inspector	()/-
Not reviewed	Verbal confirmation by facility staff	
Comments:		

DOC 350.24 Discipline. The jail shall have policies and procedures outlining inmate discipline and due process.

DOC 350.24 (1) Inmates rules of behavior. Every jail shall have written rules of behavior for inmates. At the time of admission, each person shall be notified verbally of the existence of jail rules for inmate behavior and the potential disciplinary actions for violations of the rules. Each inmate shall be provided with a copy of the jail rules or copies of the rules shall be posted in conspicuous places in the jail.

DOC 350.24 (2) Discipline for minor violation. (See code for specific language.)

- (a) A minor discipline is a verbal or written reprimand, restriction of privileges or placement in disciplinary segregation for 24 hours or less.
- (b) Inmate is informed of violation, potential discipline and disciplinary procedures for minor violations.
- (c) Inmate has opportunity to make verbal statement about alleged violation to a staff member
- (d) Staff member may impose a minor discipline if found that violation occurred
- (e) Supervisor is informed of incident by staff member. If supervisor concludes violation is major, then it shall be handled in accordance with Sub. (3). If supervisor finds that no violation occurred, the inmate shall be notified that the charge has been dismissed.
- (f) Inmate is notified of right to appeal and of appeal procedure.
- (g) Information made part of inmate's file. If supervisor finds no violation occurred, the due process records shall reflect those findings.

DOC350.24 (3) Discipline for major violation. (See code for specific language.)

- (a) A major discipline is restriction of privileges for more than 24 hours, placement in solitary confinement for more than 24 hours in accordance with s. 302.40, Stats., loss of good time in accordance with s. 302.43, Stats., restrictions affecting Huber law privileges in accordance s. 303.08, Stats., or restrictions affecting work release in accordance with s. 303.065, Stats.
- (b) Written report to supervisor within 24 hours of incident
- (c) Inmate notification of charges and right to hearing 24 hours in advance of hearing.
- (d) Due process hearing within seven calendar days, unless inmate waives the right to a due process hearing.
 - 1. Impartial hearing officer or committee (not involved in incident)
 - 2. Inmate's right to be present at hearing, make a statement and present evidence. Reason for inmate's absence documented.
 - 3. Inmate's right to present witnesses. Reason for absence of witness documented.
 - 4. Inmate's right to staff advocate if inmate is illiterate or if issues are complex.
 - 5. Hearing officer may consider inmate's mental illness, developmental disability or other emotional or mental disability as a mitigating factor in imposing discipline.
 - 6. Written decision stating discipline administered. Copy to inmate.
 - 7. Inmate is notified of right to appeal and appeal procedure
 - 8. Incident information, discipline administered and decision shall be made part of inmate file. If found no violation occurred, the due process records shall reflect those findings.
- e) If inmate waives right to a due process hearing, violation shall be disposed of in accordance with procedures for minor violations. Major discipline may be imposed if relevant staff member finds a violation occurred. Waiver does not constitute an admission of the alleged violation.

350.24(4) Classification.

(a) An inmate may be evaluated for custody classification following the imposition of discipline.

COMPLIANCE

VERIFICATION

Meets standard

Policy and procedure manual review
Previous compliance documented

Needs improvement

Sample of facility records reviewed
Other (specify):

Non-compliant
Sight confirmation by inspector

Not reviewed
Verbal confirmation by facility staff

Comments: A spot check of records revealed noncompliance with the following issues noted:

- •Contrary to DOC 350.24(3)(c), a due process hearing was held within 24 hours of the inmate being served notice (without the inmate waiving this time period).
- •Contrary to DOC 350.24(3)(d)(1), a due process hearing was facilitated by a staff member who was involved in the incident.
- •Contrary to DOC 350.24(3)(e), the inmate disciplinary hearing form states "a waiver constitutes an admission of guilt to the alleged violation."

Also of concern, a spot check of minor disciplinary reports revealed some inmates actually received major dispositions. As was discussed during the inspection closeout, administration is encouraged to utilize separate due process forms for both minor and major disciplines (which mirror the respective procedural requirements of DOC 350.24).

HEALTH CARE

DOC 350.13 Inmate health screening. The jail shall have policies and procedures for inmate health screening.

DOC 350.13 (1) Use of a health screening form that is developed in conjunction with health care professionals and is used at booking with each inmate to record information about medical, mental health and dental conditions, physical and developmental disabilities, alcohol or other drug abuse problems and suicide risk.

DOC 350.13 (2) Referrals to medical, mental health or supervisory staff in a timely manner in response to identified concerns. If urgent concerns are identified, the referral shall be immediate.

DOC 350.13 (3) Review of the health screening form by health care or other designated staff within 72 hours if non-urgent concerns are identified.

Review by health care provider is conducted and documented.

DOC 350.13 (4) Documentation of health screening results and subsequent review of the health screening form in an inmate's confidential file.

- Health screening forms are legible, accurate and complete, including detailed narratives when necessary.
- Health care professionals provided input into the content of the health screening form.
- The health screening form contains usable information relating to the inmate's medical condition, dental condition, medical disabilities, developmental disabilities, alcohol and other drug abuse and suicide risk.
- A health screening form is completed for each inmate booked into the facility.
- The health screening forms are reviewed for completeness, accuracy, legibility and the appropriateness of the decisions made regarding referral, housing, classification and other actions.
- The identity of the person completing the health screening form is documented.

	,, p p	3				
COMF	PLIANCE	VE	RIFICATION			
\boxtimes	Meets standard	\times	Policy and procedure manual review		Previous compliance documented	
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):	
	Non-compliant	Sight confirmation by inspector				
	Not reviewed	\boxtimes	Verbal confirmation by facility staff			
	Comments: A health screening form is completed for inmates booked into the jail and healthcare staff review each form completed forms were observed in individual medical files).					
comp	OOC 350.13 (5) A health appraisal that is to be completed within 14 days after arrival at the facility unless a health appraisal has been completed by health care staff within the previous 90 days. The health appraisal shall be completed by health care staff in accordance with protocols established by the responsible physician.					
COMF	PLIANCE	VE	RIFICATION			
	Meets standard	\times	Policy and procedure manual review		Previous compliance documented	
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):	
\boxtimes	Non-compliant		Sight confirmation by inspector			
	Not reviewed	\boxtimes	Verbal confirmation by facility staff			
comments: It was reported and a spot check of records revealed not all appraisals were completed within the 14-day equirement during this inspection period. It should be noted an H&P log is now being utilized to track the completion and timeliness of appraisals.						

DOC 350.14 Inmate health care. There shall be sufficient equipment, material, space and supplies for the performance of health care services in a confidential manner.

COMPLIANCE		VERIFICATION				
	Meets standard		Policy and procedure manual review		Previous compliance documented	
	Needs improvement		Sample of facility records reviewed		Other (specify):	
	Non-compliant	\boxtimes	Sight confirmation by inspector			
	Not reviewed		Verbal confirmation by facility staff			
Comments: There is a health services office for medical staff to see inmates						

DEPARTMENT OF CORRECTIONS WISCONSIN Office of Detention Facilities DOC-2744 (4/2015) DOC 350.14 (1) The sheriff shall provide or secure necessary medical and mental health treatment and emergency dental care for inmates in custody. Jail provides a specific form for inmates to request medical assessment or treatment. All inmate requests for medical care are reviewed by health care staff. The dispositions of the inmate medical requests are documented by health care staff members. **VERIFICATION** COMPLIANCE Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: DOC 350.14 (3) Health care staff shall be in compliance with state and federal licensure certification and registration. Verification of compliance shall be maintained at the facility. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: A spot check of records verified compliance. DOC 350.14 (4) Medical records shall be kept separate from other records and shall be maintained in a confidential manner in accordance with s. 146.81 to s. 146.83, Stats., and any other applicable state or federal laws. Medical record accessibility is limited to medical staff, the jail administrator and the administrator's designees as appropriate. **COMPLIANCE** VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Medical records are securely stored within the health services unit. DOC 350.14 (6) Officers shall receive documented annual training on health care policies and procedures, medications and health screening at the time of admission. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: A spot check of records verified compliance. DOC 350.15 Health care policy. The jail shall have policies and procedures for inmate health care.

DOC 350.15 (2) Maintenance of documents in an inmate's confidential file.

COMPLIANCE

VERIFICATION

Desirement and accordance of the confidential file.

 COMPLIANCE
 VERIFICATION

 Meets standard

 Meets standard

 Meets standard

 Previous compliance documented

 Needs improvement

 Sample of facility records reviewed

 Other (specify):

 Non-compliant

 Sight confirmation by inspector

 Not reviewed

 Verbal confirmation by facility staff

Comments:

DOC 350.15 (1) Documentation of health referrals made or health care provided.

Office of Detention Facilities DOC-2744 (4/2015)

DOC	-2744 (4/2015)				
	350.15 (3) Names, addresses and tele gency and routine health care service		ne numbers of health care providers or age r inmates.	enc	cies who have agreed to provide
	Contact information is available to st	aff.			
COM	PLIANCE	VEI	RIFICATION		
		\overline{X}	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed	\exists	Other (specify):
	Non-compliant	F	Sight confirmation by inspector		Other (appears).
	Not reviewed	X	Verbal confirmation by facility staff		
Come			voisal communicities by facility stain		
Comin	nents:				
DOC	350.15 (4) Referral of an inmate to jai	I hea	alth care staff or to other agencies that prov	/ide	e health care.
:	Health care referrals are made and c Staff are knowledgeable about the h	docui	mented.		
COM	PLIANCE	VE	RIFICATION		
$\overline{\mathbb{X}}$	Meets standard	X	Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\overline{\mathbb{X}}$	Sample of facility records reviewed	$\overline{\exists}$	Other (specify):
	Non-compliant	Ī	Sight confirmation by inspector		
	Not reviewed	Ī	Verbal confirmation by facility staff		
Comp	nents:				
Comm	iono.				
DOO	050 45 (5) David and a 4 (6)		and a few to the least the same to the terms of the		Parameter Control of Control of Control
DOC	350.15 (5) Designation of staff who h	ave	authority to make health care decisions, inc	ciu	ding emergency medical and dental care.
DOC	350.15 (6) Non-emergency health car	e. in	cluding the use of an inmate's personal phy	vsi	cian.
		-,		, -	
COM	PLIANCE	VE	RIFICATION		
	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Comn	nents:				
DOC	350.15 (7) Schedule of inmate access	s to I	outine medical care.		
_	The achadula of invests access to us	l:		ء مالہ	
-	list, or other appropriate means.	eaica	al care is provided to inmates in writing via hand	abo	bok, posted notice, inmate rule and regulation
		acce	ss medical care is provided if the inmates are u	una	able to read or write.
COM	PLIANCE	VFI	RIFICATION		
		<u> </u>	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed	퓜	
	Non-compliant	누	Sight confirmation by inspector	<u> </u>	Other (specify):
	Not reviewed				
			Verbal confirmation by facility staff		
	•		es medical services at the jail (35 ho		
nour	s/week for a physician's assistan	t). <i>i</i>	Access to care is outlined in the inmate	e r	ules.
DOC	350.15 (8) Provision for inmates with	chr	onic medical conditions.		
COM	PLIANCE	VFI	RIFICATION		
		X	Policy and procedure manual review		Previous compliance documented
			Sample of facility records reviewed	+	
_ <u></u>	Needs improvement	늗		<u> </u>	Other (specify):
	Non-compliant	늗	Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Comn	nents:				

Office of Detention Facilities DOC-2744 (4/2015)

DOC-2	2744 (4/2015)							
DOC 35	50.15 (9) Procedure for processing in	ıma	te medical requests on a daily basis.					
:	 Inmate medical requests are documented on an official medical request form. Written disposition of medical requests are retained in inmate's confidential medical file. 							
COMPL	IANCE	√ER	IFICATION					
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented			
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):			
	Non-compliant		Sight confirmation by inspector					
	Not reviewed	\boxtimes	Verbal confirmation by facility staff					
Comme	ents: Completed forms were obse	rve	d in individual medical files.					
	ng emergency services.				d identification of the services provided,			
•	Health care services provided or refus	ed a	are documented in the inmate's confidential m	edi	cal file.			
COMPL	IANCE	√ER	IFICATION					
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented			
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):			
	Non-compliant		Sight confirmation by inspector					
	Not reviewed		Verbal confirmation by facility staff					
Comme	ents:							
•	Special diets ordered by a qualified he	ealth	ered by a qualified health care professional care professional are documented in the inmate providers, and correctional staff are notified of	ate				
COMPL	IANCE	√ER	IFICATION					
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented			
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):			
<u> </u>	Non-compliant	Щ	Sight confirmation by inspector					
	Not reviewed	\boxtimes	Verbal confirmation by facility staff					
			dical diets are reviewed by the health		authority. Ordered medical diets are the kitchen and in individual medical			
DOC 35	50.15 (12) Pregnancy management.							
COMPL	IANCE	/ER	IFICATION					
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented			
	Needs improvement		Sample of facility records reviewed		Other (specify):			
	Non-compliant		Sight confirmation by inspector	_				
	Not reviewed		Verbal confirmation by facility staff					
Comme	ents:							
DOC 35	50.15 (13) Maintenance of agreement	s be	etween the jail and providers of health care	se	rvices.			
COMPL	IANCE	VER	IFICATION					
	Meets standard	\boxtimes		\boxtimes	Previous compliance documented			
	Needs improvement	Ħ	Sample of facility records reviewed	\exists	Other (specify):			
	Non-compliant	靣	Sight confirmation by inspector		(-1 7)			
	Not reviewed		Verbal confirmation by facility staff					
Comme	ents:							

DOC 350.15 (14) Use of health transfer summary form under s. 302.388 (2), Stats.

Wisconsin State Statute 302.388 Prisoner medical records.

(2) HEALTH SUMMARY FORM.

- (a) The department shall provide each jailer a standardized form for recording the medical conditions and history of prisoners being transferred to the department or another county's jail. Except as provided in pars. (b) and (bm), jail medical staff shall complete the form and provide it to the receiving institution intake staff at the time of each such transfer.
- (b) If the jail does not have medical staff on duty at the time of a transfer, the jailer or his or her designee shall complete as much of the form as possible and provide it to the receiving institution intake staff at the time of the transfer. The jailer shall ensure that all of the following occur within 24 hours after the transfer.
 - 1. The jail medical staff, the prisoner's health care provider or, if the prisoner does not have a health care provider, a health care provider under contract with the jail reviews the form provided to the receiving institution at the time of the transfer.
 - 2. The medical staff or health care provider reviewing the form corrects any errors in the form and includes in it any additional available information.
 - 3. The medical staff or health care provider reviewing the form transmits the updated form or the information included on the form by the quickest available means to the receiving institution intake staff.

(bm) Jail medical staff need not complete the form if the jailer or his or her designee provides a copy of the prisoner's complete medical file to the receiving institution intake staff at the time of the transfer.

- (f) Receiving institution intake staff may make a health summary form available to any of the following:
 - 1. The prison's or jail's medical staff.
 - 2. A prisoner's healthcare provider.
 - 3. In the case of a prison or jail that does not have medical staff on duty at the time of the transfer, a health care provider designated by the department or the jailer to review health summary forms.
 - 4. In the case of a jail that does not have medical staff, a person designated by the jailer to maintain prisoner medical records.

COMPLIANCE	VERIFICATION					
Meets standard	Policy and procedure manual review	Previous compliance documented				
Needs improvement	Sample of facility records reviewed	Other (specify):				
Non-compliant	Sight confirmation by inspector					
Not reviewed	∀ Verbal confirmation by facility staff					
•	erified general compliance; however, sec cal are encouraged to review the practice	•				
DOC 350.15 (15) Communicable disease and infection control. Policies and procedures relating to communicable disease and infection control shall contain all of the following components: (a) Provision of treatment and supervision of inmates during isolation or quarantine under s. 252.06(6)(b), Stats. (b) Documentation of the need for isolation or quarantine under s. 252.06(6)(b), Stats., in the inmate's confidential medical file. (c) Provision of laboratory screening for inmates who may have been exposed to a communicable disease if ordered by medical personnel. (d) Provision for handling bio-hazardous waste and decontaminating medical and dental equipment in accordance with regulations.						
COMPLIANCE	VERIFICATION					
Meets standard	Policy and procedure manual review	Previous compliance documented				
Needs improvement	Sample of facility records reviewed	Other (specify):				
Non-compliant	Sight confirmation by inspector					
Not reviewed	Verbal confirmation by facility staff					
Comments:						
DOC 350.15 (16) Detoxification and manag	ement of intoxicated inmates.					

Policy and procedure manual review

Sample of facility records reviewed

Verbal confirmation by facility staff

Sight confirmation by inspector

VERIFICATION

Appropriate housing and supervision is provided.

COMPLIANCE

Meets standard

Non-compliant

Not reviewed

Needs improvement

Previous compliance documented

Other (specify):

1	\sim	_	m	'n	Դ Բ	n	to

and a	350.16 Control and administration o administration of prescription and non			nd p	procedures relating to the control, delivery
	., .		ional shall prescribe medications and ord	ler tı	reatments.
	PLIANCE		RIFICATION		
			Policy and procedure manual review	L	Previous compliance documented
<u> </u> _	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant	\perp	Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Comr	ments:				
docu	mented training shall be provided to j			s of	medication at prescribed times. Annual
СОМІ	PLIANCE	VEF	RIFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
	ssary.		personnel that all medications brought in	-	nmates or other persons for an inmate are
		-			money management
COM	PLIANCE	$V \vdash \vdash$			
	PLIANCE Meets standard		RIFICATION Policy and procedure manual review		Previous compliance documented
СОМІ	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented Other (specify):
	Meets standard Needs improvement		Policy and procedure manual review Sample of facility records reviewed		Previous compliance documented Other (specify):
	Meets standard	\boxtimes	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector		•
Comr	Meets standard Needs improvement Non-compliant Not reviewed ments: The jail nurse has prima	ry r	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff esponsibility for verifying incoming dication verification form is utilized.		Other (specify): edications (unless not onsite and a
Comr	Meets standard Needs improvement Non-compliant Not reviewed ments: The jail nurse has prima ectional officer does). A standard 350.16 (4) All medications brought in	ry reme	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff esponsibility for verifying incoming dication verification form is utilized. e jail shall be inventoried and placed in solutions.	ecui	Other (specify): edications (unless not onsite and a
Comre	Meets standard Needs improvement Non-compliant Not reviewed ments: The jail nurse has prima ectional officer does). A standard 350.16 (4) All medications brought in The storage of inmate medications medications that require refrigeration locked container stored in a refrigera	ry r me	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff esponsibility for verifying incoming dication verification form is utilized. e jail shall be inventoried and placed in selection in a locked drug cabinet is them readily identifiable. kept in a separate, medical refrigerator, unlead accessible to inmates.	ecui that	Other (specify): edications (unless not onsite and a re storage. is not accessible to inmates.
Comre	Meets standard Needs improvement Non-compliant Not reviewed ments: The jail nurse has prima ectional officer does). A standard 350.16 (4) All medications brought in 350.16 (5) Any medications kept at the The storage of inmate medications medications that require refrigeration locked container stored in a refrigera	ry r me	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff esponsibility for verifying incoming dication verification form is utilized. The jail shall be inventoried and placed in second in a locked drug cabinet as them readily identifiable. REFICATION	ecui that	Other (specify): edications (unless not onsite and a restorage. is not accessible to inmates. ne medications are secured in a separate,
Comre	Meets standard Needs improvement Non-compliant Not reviewed ments: The jail nurse has primal ectional officer does). A standard 350.16 (4) All medications brought in the storage of inmate medications of Medications that require refrigeration locked container stored in a refrigeral PLIANCE Meets standard	ry r me to the jain akes are tor ir	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff esponsibility for verifying incoming dication verification form is utilized. The jail shall be inventoried and placed in some standard in a locked drug cabinet as them readily identifiable. The procedure manual review Policy and procedure manual review	ecui that	Other (specify): edications (unless not onsite and a restorage. is not accessible to inmates. ne medications are secured in a separate, Previous compliance documented
Comre	Meets standard Needs improvement Non-compliant Not reviewed ments: The jail nurse has prima ectional officer does). A standard 350.16 (4) All medications brought in 350.16 (5) Any medications kept at the The storage of inmate medications medications that require refrigeration locked container stored in a refrigera PLIANCE Meets standard Needs improvement	ry r me	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff esponsibility for verifying incoming dication verification form is utilized. Le jail shall be inventoried and placed in selection in a locked drug cabinet as them readily identifiable. Le them readily identifiable. Replaces in a separate, medical refrigerator, unlest accessible to inmates. REFICATION Policy and procedure manual review Sample of facility records reviewed	ecui that	Other (specify): edications (unless not onsite and a restorage. is not accessible to inmates. ne medications are secured in a separate,
Comre	Meets standard Needs improvement Non-compliant Not reviewed ments: The jail nurse has primal ectional officer does). A standard 350.16 (4) All medications brought in 350.16 (5) Any medications kept at the The storage of inmate medications medications that require refrigeration locked container stored in a refrigera PLIANCE Meets standard Needs improvement Non-compliant	ry ry me to the jain akee are tor in VEF	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff esponsibility for verifying incoming dication verification form is utilized. e jail shall be inventoried and placed in sall be stored in a locked drug cabinet as them readily identifiable. kept in a separate, medical refrigerator, unlead to a separate and placed in sall FICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector	ecui that	Other (specify): edications (unless not onsite and a restorage. is not accessible to inmates. ne medications are secured in a separate, Previous compliance documented
Commocorre	Meets standard Needs improvement Non-compliant Not reviewed ments: The jail nurse has prima ectional officer does). A standard 350.16 (4) All medications brought in 350.16 (5) Any medications kept at the The storage of inmate medications medications that require refrigeration locked container stored in a refrigera PLIANCE Meets standard Needs improvement	ry ry me to the e jain akes are tor irr VEF	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff esponsibility for verifying incoming dication verification form is utilized. The jail shall be inventoried and placed in section in a locked drug cabinet is them readily identifiable. Repaired in a separate, medical refrigerator, unlessed in a separate, medical refrigerator, unlessed in a separate in a separate. RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff	ecui that	Other (specify): edications (unless not onsite and a restorage. is not accessible to inmates. ne medications are secured in a separate, Previous compliance documented

DO	OC-2	2744 (4/2015)			
DO	C 35	50.16 (6) Administration or delivery o	f pı	rescription and nonprescription medication	s to inmates.
	-	Personnel authorized to administer me	edic	ations are listed in the current policy and proce	edure manual and accessible to all jail staff.
СО	MPL	IANCE \	/EF	RIFICATION	
	X	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
		Needs improvement	\boxtimes	Sample of facility records reviewed	Other (specify):
		Non-compliant		Sight confirmation by inspector	
		Not reviewed	\boxtimes	Verbal confirmation by facility staff	
Cor	nme	ents:			
who	o ad C 35	Iministered or delivered the medication 50.16 (8) All refusals of recommender sional shall monitor the inmate in accordance All medication documentation is completed to the pharmacist or qualifier	on, d ord ord lete	and the date and time of administration or	Il be documented. A health care b. cd) name of the medication, the dosage and
		The medication administration and del completeness, accuracy, and legibility.		ry records are reviewed by the health care pro-	,
CO	MPL	LIANCE \	/EF	RIFICATION	
[Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
[Needs improvement	\boxtimes	Sample of facility records reviewed	Other (specify):
	\boxtimes	Non-compliant		Sight confirmation by inspector	
		Not reviewed	\boxtimes	Verbal confirmation by facility staff	
we	re c	observed on the MAR's. 50.16 (9) Return of an inmate's medic			npliance, as multiple unexplained gaps
		50.16 (10) Inventory or disposal of un The return of an inmate's medication is Unused medication is disposed of by a Established protocols regarding the dis	s do	ed medications upon the inmate's release o	, or returned to a pharmacy. presence, are followed.
CO	MPL	LIANCE \	/ER	RIFICATION	
[X	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
[Needs improvement		Sample of facility records reviewed	Other (specify):
[Non-compliant		Sight confirmation by inspector	
		Not reviewed	\boxtimes	Verbal confirmation by facility staff	
				ations not returned to the inmate or p a standard medication disposal form) HIGH RISK SUPERVISION	harmacy are disposed of by the health .
ma	y be	at risk of seriously injuring themselv	es.		he supervision and housing of inmates who
		LIANCE \	_	RIFICATION	
[\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
[Needs improvement		Sample of facility records reviewed	Other (specify):
[Non-compliant		Sight confirmation by inspector	
		Not reviewed		Verbal confirmation by facility staff	

Comments:

DOC 350.17 (suicide or self	•	form	ation from the arresting or transporting	ag	ency to assess an inmate's potential for
COMPLIANCE	,	/ER	FICATION		
Mee	ts standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
Nee	ds improvement		Sample of facility records reviewed		Other (specify):
Non	-compliant		Sight confirmation by inspector		
Not	reviewed	\boxtimes	Verbal confirmation by facility staff		
Comments: D	ocumented using the 'Inma	ate /	Admission' form.		
DOC 350.17 (2	2) Intake screening of inmates	tha	includes interview items and staff observ	/ati	on related to potential suicide risk.
	screening is performed on each				
	nswers to all screening question				
			d complete, including detailed narratives who and answers recorded, when suicide risk is in		
Medic	al or mental health care profess	ional	s review intake screening reports when risk is	s in	dicated.
			ening reports for completeness, accuracy, legition and risk assessments is conducted.	gibil	lity, consistency, appropriateness of housing
COMPLIANCE			FICATION		
	ts standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
_=	ds improvement	Ħ	Sample of facility records reviewed	ಠ	Other (specify):
_=	-compliant		Sight confirmation by inspector	<u> </u>	Care (open).
	reviewed	Ħ	Verbal confirmation by facility staff		
an inmate on an imme b) Imme b) Desig	suicide watch shall include all diate notification to designated s nation of housing areas and sec	of t l uper urity		ide uici	ide watch.
COMPLIANCE	,	/ER	FICATION		
Mee	ts standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
_=	ds improvement	X	Sample of facility records reviewed		Other (specify):
	-compliant	Ħ	Sight confirmation by inspector		Career (epocary)
	reviewed	Ħ	Verbal confirmation by facility staff		
Comments: In	mates placed on a suicide	wa	tch are generally housed in a receiving	ng	cell.
DOC 350.17 (4	l) Identification of trained pers	sons	who may assess an inmate's level of suic	cide	e risk.
COMPLIANCE	•	/ER	FICATION		
Mee	ts standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
Nee	ds improvement	$\bar{\boxtimes}$	Sample of facility records reviewed		Other (specify):
Non	-compliant		Sight confirmation by inspector		
Not	reviewed		Verbal confirmation by facility staff		
	lental health services are lth Care (NCHC) also prov		tracted through Correct Care Soluti	ion	s (onsite 8 hours per week). North

Office of Detention Facilities DOC-2744 (4/2015) DOC 350.17 (5) Notification to qualified mental health professionals within 12 hours of placement of a potentially suicidal inmate on suicide watch. Assessment by a qualified mental health professional shall be completed as soon as practicable. Recommendations and decisions from qualified mental health professional are documented and maintained at the jail. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: DOC 350.17 (6) Identification of qualified mental health professionals who are authorized to remove an inmate from a suicide watch status after an on-site face-to-face assessment. **COMPLIANCE** VERIFICATION Meets standard Previous compliance documented Policy and procedure manual review Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: DOC 350.17 (7) Frequency of communication between health care and jail personnel regarding the status of an inmate who is on suicide watch. A clear and reliable means of communicating information between correctional staff members regarding inmates who are suicide risks is utilized. All communication between jail staff, administration, and medical/mental health care providers is documented, including names of those involved, summary of content of discussion, and actions taken. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: DOC 350.17 (8) Intervention protocol during an apparent suicide attempt, including life-sustaining measures. Staff demonstrate a working knowledge of first aid and emergency response measures. Staff are familiar with the location and effective use of emergency response equipment. Staff received training on emergency response, including use of emergency response equipment within the past evaluation period. The actions taken in response to a suicide in progress or suicide threat are documented. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify):

Sight confirmation by inspector

Verbal confirmation by facility staff

Comments: Emergency response equipment and cutdown tools are maintained in the facility (staff were able to identify

Non-compliant Not reviewed

where they are located).

DOC-2744 (4/2015)			
DOC 350.17 (9) Identification of persons to	o be	notified in case of attempted or completed	suicides.
COMPLIANCE	VEF	RIFICATION	
Meets standard	X	Policy and procedure manual review	Previous compliance documented
Needs improvement		Sample of facility records reviewed	Other (specify):
Non-compliant		Sight confirmation by inspector	
Not reviewed		Verbal confirmation by facility staff	
Comments:			
Supervisory review of the relevant COMPLIANCE Meets standard Needs improvement Non-compliant Not reviewed Comments: A spot check of records verience.	ental I al he docu VEF	nealth professional. alth professional removing an inmate from a simentation is completed. RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff d general compliance; however, not a	suicide risks, including all of the following: Buicide watch including name, date and time. Previous compliance documented Other (specify): Compliance documented standards were provided subsequent to the
DOC 350.17 (11) Implementation of 2 hour factors.	rs of	annual documented staff training regarding	ng suicide prevention and identification of risk
COMPLIANCE	VEF	RIFICATION	
Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
Needs improvement	\boxtimes	Sample of facility records reviewed	Other (specify):
Non-compliant		Sight confirmation by inspector	
Not reviewed		Verbal confirmation by facility staff	
Comments: A spot check of records ve	rifie	d staff received annual suicide prever	ntion training.
DOC 350.17 (12) Access by staff to debrie	fing	and support services.	
COMPLIANCE	VEF	RIFICATION	
Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
Needs improvement		Sample of facility records reviewed	Other (specify):
Non-compliant		Sight confirmation by inspector	
Not reviewed		Verbal confirmation by facility staff	
Comments:			
DOC 350.17 (13) Implementation of an ope	eratio	onal review following a suicide or significa	ent suicide attempt.
DOC 350.17 (13) Implementation of an ope			nt suicide attempt.
COMPLIANCE	VEF	RIFICATION	
COMPLIANCE Meets standard		RIFICATION Policy and procedure manual review	Previous compliance documented
COMPLIANCE Meets standard Needs improvement	VEF	Policy and procedure manual review Sample of facility records reviewed	
COMPLIANCE Meets standard	VEF	RIFICATION Policy and procedure manual review	Previous compliance documented

DOC-2744 (4/2015)

DOC 350.25 Administrative confinement. In this section, "administrative confinement" means a non-punitive, segregated confinement of an inmate in his or her cell or other designated area to ensure personal safety and security within the jail. The jail shall have policies and procedures outlining the administrative confinement proces.

policies and procedures outlining the administrative confinement proces. DOC 350.25 (1) An inmate may be placed in administrative confinement if the inmate's continued presence in the general population meets one of the following: (a) Presents a substantial risk of physical harm to the inmate, another person or property. (b) Threatens the security and order of the jail. (c) Inhibits a pending disciplinary investigation. **COMPLIANCE** VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: It was reported one inmate was placed in administrative confinement during this inspection period. DOC 350.25 (2) A jail staff member shall inform his or her supervisor of any incident that may require administrative confinement of an inmate and the supervisor shall determine whether to place the inmate in administrative confinement. In the absence of his or her supervisor, a jail staff member may place an inmate in administrative confinement. The staff member's supervisor shall review that placement decision within 24 hours. This review shall include evaluation of inmate's classification. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Verbal confirmation by facility staff Not reviewed Comments: DOC 350.25 (3) An inmate's progress in administrative confinement shall be reviewed by a supervisor at least once every seven days. The supervisor shall determine when the inmate no longer presents a threat to the safety, security and order of the jail and may be released to the general population. Each review shall be documented. COMPLIANCE **VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: DOC 350.25 (4) The reason an inmate is placed in administrative confinement and the length of time the inmate remains in administrative confinement shall be documented in the inmate's file. The inmate is informed of the reasons and conditions of the inmate's Administrative Confinement. **COMPLIANCE** VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify):

Sight confirmation by inspector

Verbal confirmation by facility staff

Non-compliant

Not reviewed

Comments:

Previous compliance documented

Ott. - - (- - - - :f.)

RECORDS AND REPORTING

DOC 350.10 Records and reporting.

Meets standard

Not reviewed

Neede improvement

DOC 350.10 (1) Register of inmates. Each jail shall keep a register of all inmates. The register shall contain identifying information on each inmate, including name, residence, age, sex, race, court order, time and cause of placement and placing authority, and time of release and releasing authority. If an inmate escapes, the time and manner of the escape shall be recorded in the register.

Policy and procedure manual review

Comple of facility records reviewed

VERIFICATION

	Non-compliant	Sight confirmation by inspector					
	Not reviewed	Verbal confirmation by facility staff					
Comment	Comments:						
DOC 350.10 (2) Storage of records. Records shall be kept in a secure area. Juvenile records shall be kept separate from adult records and shall be maintained in a confidential manner in accordance with s. 938.396, Stats., and any other applicable federal or state law.							
and shall	be maintained in a confidential ma	inner in accordance with s. 938.396, Stats., and any other applicable federal or state law.					
COMPLIA		VERIFICATION					
		1 1 1					
COMPLIA	NCE	VERIFICATION					
COMPLIA	NCE \ Meets standard	VERIFICATION Policy and procedure manual review Previous compliance documented					

Comments:

COMPLIANCE

MAINTENANCE OF JAIL, SANITATION AND CARE OF PRISONERS

Verbal confirmation by facility staff

Wisconsin State Statute 302.37 Maintenance of jail and care of prisoners.

Wisconsin State Statute 302.37 (1) (a) The sheriff or other keeper of a jail shall constantly keep it clean and in a healthful condition and pay strict attention to the personal cleanliness of the prisoners and shall cause the clothing of each prisoner to be properly laundered. The sheriff or keeper shall furnish each prisoner with clean water, towels and bedding. The sheriff or keeper shall serve each prisoner 3 times daily with enough well-cooked, wholesome food. The county board shall prescribe an adequate diet for the prisoners in the county jail.

Wisconsin State Statute 302.37(3)(a) The county or municipality shall furnish its jail with necessary bedding, clothing, toilet facilities, light and heat for prisoners

Wisconsin State Statute 302.37 (4) The sheriff or other keeper of a jail may use without compensation the labor of any prisoner sentenced to actual confinement in the county jail or, with the prisoner's consent, any other prisoner in the maintaining of and the housekeeping of the jail, including the property on which it stands. Any prisoner who escapes while working on the grounds outside the jail enclosure shall be punished as provided in s. 946.42.

- A daily inspection is conducted by jail staff of housekeeping, sanitation, and physical plant maintenance.
- The jail is constantly clean and in a healthful condition.
- Inmate areas are free of graffiti, posters, wall coverings, etching, etc.
- All surfaces, equipment, and facilities are clean and in good repair.
- Air handling systems, including ventilation screens and covers, are clean, unobstructed, and in good working order.
- Inmate personal property allowed in the housing units is subject to limitations on volume and content.
- Inmates are held accountable for making the beds, cleaning the floors, cleaning the common bathroom facilities, properly storing property, and maintaining cleanliness and order in the housing units daily.
- Inmates and staff are held accountable for housekeeping and sanitation deficiencies.
- Identified maintenance needs are addressed in a timely manner.
- Hallways are free of clutter and obstructions.

DOC-21	744 (4/2013)	
COMPLIANCE		VERIFICATION
\boxtimes	Meets standard	Policy and procedure manual review Previous compliance documented
	Needs improvement	☐ Sample of facility records reviewed ☐ Other (specify):
	Non-compliant	Sight confirmation by inspector
	Not reviewed	Verbal confirmation by facility staff

Comments: In summary, the overall appearance of the jail was in satisfactory condition. There were no significant signs of graffiti or property defacing. A spot check of facility conditions and mechanical devices revealed the following issues:

- Staff and inmates reported the telephones were inoperable (addressed subsequent to the inspection).
- Dried toilet paper was stuck along a wall in housing unit MH (addressed subsequent to the inspection).
- The floor in housing unit AD was in need of cleaning (addressed subsequent to the inspection).
- The floors of the kitchen cooler and dry storage were in need of cleaning (addressed subsequent to the inspection).
- Inmates reported the washbasins in cells NS-4 and F-2 were not working (addressed subsequent to the inspection).
- The ceilings of H1, H3, and H4 were in need of cleaning (addressed subsequent to the inspection).
- There appears to be a leak in the ceiling outside of the laundry area in the hallway.
- Inmates reported the showers in H3 and H4 were leaking into the adjacent bathroom area.

DOC 350.12 Sanitation and Hygiene. The jail shall have policies and procedures relating to sanitation and hygiene.

- Flies were observed in the showers of MH, SM, NS, PP, and F units.
- Non-security screws were utilized to install the outlet covers for the kiosks. Additionally, it is recommended security caulk be applied along the conduit for the kiosks.

DOC 350.12 (1) Facilities are required to be clean and in good repair.							
COMPLIANCE	VERIFICATION						
Meets standard	Policy and procedure manual review Previous compliance documented						
Needs improvement	Sample of facility records reviewed Other (specify):						
Non-compliant	Sight confirmation by inspector						
Not reviewed	∀erbal confirmation by facility staff						
Comments: See comments from previo	us section.						
DOC 350.12 (2) Blankets shall be laundered monthly and before reissue. DOC 350.12 (3) Sheets, pillowcases and mattress covers shall be changed and washed at least weekly and before reissue. DOC 350.12 (4) Clean towels shall be issued to each inmate twice a week.							
COMPLIANCE	VERIFICATION						
Meets standard	Policy and procedure manual review Previous compliance documented						
Needs improvement	Sample of facility records reviewed Other (specify):						
Non-compliant	Sight confirmation by inspector						
Not reviewed	Verbal confirmation by facility staff						
Comments: Staff and inmates reported week.	blankets are laundered once a month, bedding once a week, and towels twice a						

DOC 350.12 (5) Mattresses shall be provided where there is a need for overnight detention. Each mattress and each pillow, if used, shall be covered with a fire retardant, waterproof, easy-to-sanitize material. Mattresses and pillows shall be kept in good repair and in a clean and sanitary condition. The sheriff shall provide adequate bedding. Mattresses shall be cleaned and sanitized before reissue.

DOC 350.12 (6) Suppliers of mattresses and pillows shall be provide evidence to the sheriff that the products are fire retardant,

DISTRIBUTION: Original – Office of Detention Facilities; Copy – Facility Administrator

DOC 350.12 (7) Mattresses shall be of proper size to fit the bed.

waterproof, and easy to clean.

DEPARTMENT OF CORRECTIONS WISCONSIN Office of Detention Facilities DOC-2744 (4/2015) **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: A spot check of mattresses verified compliance. DOC 350.12 (8) The sheriff shall provide an inmate whose clothing has been confiscated with adequate and appropriate clothing, including footwear, for use while the inmate is in custody. Footwear shall be cleaned and sanitized before reissue. **COMPLIANCE VERIFICATION** Policy and procedure manual review Previous compliance documented Meets standard Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Necessary clothing is provided at intake. It should be noted multiple inmates complained of holes in their socks. DOC 350.12 (9) Laundry schedule shall be established to meet daily needs. All issued and allowed clothing items are laundered twice weekly. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Staff and inmates reported clothing is laundered twice a week. DOC 350.12 (10) Vermin and pests are controlled with an effective, documented program. Containers of poisonous compounds used for exterminating rodents or insects shall be prominently and distinctly labeled for easy identification of contents. Poisonous compounds shall be stored independently and separately from food and kitchenware in a locked area not accessible to inmates. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: DOC 350.12 (11) After 24 hours, inmates shall be provided with towels and toilet articles sufficient for the maintenance of cleanliness and hygiene, including toothpaste and toothbrush, soap and comb. Basic feminine hygiene materials for females and toilet paper shall be provided to inmates upon request. There shall be no common use of toothbrushes, combs, shaving materials or feminine hygiene materials. COMPLIANCE VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector

Verbal confirmation by facility staff

Not reviewed

Comments:

DOC-2744 (4/2015) DOC 350.12 (12) Inmates are provided cleaning materials daily. Tables used for common use and meals shall be kept sanitized. Door traps used for passing meals or other items shall be kept sanitized. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Inmates reported having access to cleaning supplies on a daily basis. DOC 350.12 (13) Safety and sanitation inspections of the jail are completed and documented at a minimum of once monthly. COMPLIANCE VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: A spot check of records verified compliance. DOC 350.12 (14) Common use grooming tools are disinfected and cleaned before reissue and are stored in a secure area. COMPLIANCE **VERIFICATION** Policy and procedure manual review Previous compliance documented Meets standard Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: DOC 350.12 (15) Property storage containers shall be sanitized before reuse. Property storage containers may include bags, bins, totes and lockers. **COMPLIANCE VERIFICATION** Previous compliance documented Meets standard Policy and procedure manual review Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: DOC 350.12 (16) Trash is removed daily from all dayrooms. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented

Sample of facility records reviewed

Verbal confirmation by facility staff

Sight confirmation by inspector

Other (specify):

Needs improvement

Non-compliant

Not reviewed

Comments:

DOC-2744 (4/2015)

COMPI	IANCE	\/FD	IFICATION		
	Meets standard		Policy and procedure manual review		Previous compliance documented
$\frac{\square}{\square}$	Needs improvement		Sample of facility records reviewed		Other (specify):
<u> </u>	Non-compliant		Sight confirmation by inspector		Other (specify).
H	Not reviewed		Verbal confirmation by fracility staff		
<u></u>			verbal committation by facility stail		
omme	ents.				
			INMATE SERVICES		
	10.26 Grievance Process. The le to all inmates and includes a		have policies and procedures relating e level of appeal.	to an	inmate grievance process and ensure
OMPL	IANCE	VER	IFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review	\boxtimes	Previous compliance documented
Ħ	Needs improvement		Sample of facility records reviewed		Other (specify):
Ħ	Non-compliant		Sight confirmation by inspector		Care (cpccary)
Ħ	Not reviewed		Verbal confirmation by facility staff		
mme	ents: Grievance procedures	are expl	ained in the inmate rules.		
	р				
		hall have	policies and procedures to address in	mates'	access to the courts, their attorneys,
gal m	aterials.				
MPL	IANCE	VER	IFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review	\boxtimes	Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant	\boxtimes	Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
mme	ents:				
OC 35	0.28 Indigence. The jail shall	have polic	cies and procedures to address indigen	ice.	
OC 35	in 28 (1). The iail shall establish	n definitio	ns and procedures to define indigence.		
			•		
OC 35	50.28 (2) Inmates' access to he	alth care,	programming and essential services is	not p	recluded by inability to pay.
MPL	IANCE	VER	IFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review	\boxtimes	Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		· · · · · · · · · · · · · · · · · · ·
	Not reviewed		Verbal confirmation by facility staff		
mme	ents:				
		•	and procedures relating to written con-	tact be	etween inmates and their families, frie
orne	ys, the court system, governme	ent officia	Is and others.		
OC 35	60.29 (1) Provision for staff ins	pection a	nd reading of non-privileged incoming	and ou	itgoing mail.
	` ,	-			
•	Staff demonstrate a working know	owledge o	the procedures for mail inspection.		
)C 35	50.29 (2) Provision for the limit	ed inspec	tion of incoming and outgoing privilege	ed mai	
		ou mopeo	o. mooning and oatgoing privilege	Ja IIIUI	
	Ctaff damanatrata a warking kn	ovilodao o	f the definition of privileged mail and the pr	roodiu	roa for inangating it

DEPARTMENT OF CORRECTIONS
Office of Detention Facilities

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review Previous compliance documented reviewed Other (specify): ector ility staff
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ng mail is withheld.
hen mail is confiscated, destroyed, or rejected.
, , ,
ual review Previous compliance documented
ual review Previous compliance documented reviewed Other (specify):
ual review Previous compliance documented

Office of Detention Facilities DOC-2744 (4/2015) DOC 350.30 Visitation. The jail shall have policies and procedures relating to visitation. DOC 350.30 (1) Establishment of a visiting schedule for family, friends, attorneys, and others. Attorney visits shall be allowed during reasonable hours, as long as security and daily routine are not unduly interrupted. DOC 350.30 (2) Establishment of procedures for requesting visitation during nonscheduled times. Accommodations are made for visits to occur at times other than scheduled visiting times. **COMPLIANCE VERIFICATION** Policy and procedure manual review Previous compliance documented Meets standard Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Visitation procedures are explained in the inmate rules. Inmates are generally afforded two 20-minute visits each week. Visits are conducted through non-contact booths. DOC 350.30 (3) Documentation of all visits through a visitor log or register. All non-jail staff members who enter the jail are documented on the visitor's log or other appropriate register. COMPLIANCE **VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: DOC 350.30 (4) Establishment of a search policy of visitors and their possessions. Personal contact visitors are subject to a search procedure. Program workers and volunteers are subject to strict guidelines regarding personal items, carry-in equipment and compliance with jail policies. Law enforcement/Community Corrections/ Legal visitors are required to adhere to safe correctional practices limiting carry-in items and may be subject to search. Jail staff consistently apply visitation and search standards to all non-jail staff. COMPLIANCE VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: DOC 350.30 (5) Posting of visitation policies and procedures, including visitation schedule, in a place readily accessible to visitors and inmates.

Comments:

COMPLIANCE

Meets standard

Non-compliant

Not reviewed

Needs improvement

VERIFICATION

Policy and procedure manual review

Sample of facility records reviewed

Verbal confirmation by facility staff

Sight confirmation by inspector

Previous compliance documented

Other (specify):

Of	fice	of Detention Facilities 2744 (4/2015)				WISCONSIN
DOC	C 3	50.30 (6) Establishment of a search p	olio	cy for inmates before and after each visit.		
CON	MPI	LIANCE \	/EF	RIFICATION		
	X	Meets standard	X	Policy and procedure manual review		Previous compliance documented
		Needs improvement		Sample of facility records reviewed		Other (specify):
		Non-compliant	\Box	Sight confirmation by inspector		
		Not reviewed		Verbal confirmation by facility staff		
Con	nme	ents:				
DO0			jail	shall have policies and procedures relati	ing	to the provision of inmate programs and
DOC	3	50.31 (1) Use of community resource	s, c	contract providers, and volunteers authoriz	zed	by the sheriff.
DOC	3	50.31 (2) Notification to inmates of av	aila	ability, eligibility, and schedules.		
DOC	3	50.31 (3) Conducting criminal backgr	oui	nd checks on all volunteers, community re	sou	rces, and contract providers.
DOC	3	50.31 (4) Orientation and training on	faci	ility operations for all volunteers.		
		50.31 (5) Educational programming ment of Public Instruction.	g fo	or inmates who are under 18 years of a	age	consistent with the requirements of the
CON	MPI	LIANCE \	/EF	RIFICATION		
	X	Meets standard	\boxtimes	Policy and procedure manual review	\boxtimes	Previous compliance documented
		Needs improvement		Sample of facility records reviewed		Other (specify):
		Non-compliant		Sight confirmation by inspector		
		Not reviewed	\boxtimes	Verbal confirmation by facility staff		
Con	nme	ents:				
DOC DOC	0 3: 0 3:	sisting state and federal statutes. The 50.32 (1) Identification of religious or 50.32 (2) Notification to inmates of the Staff demonstrate a knowledge of the	e jai gar e s pro	shall have the opportunity to participate il shall have policies and procedures relationizations and clergy willing to conduct religions services available in the cedure for assessing and responding to inmate	ing i giou the j	to religious programming. us services in the facility.
				RIFICATION	_	
	<u> </u>	Meets standard	$\underline{\boxtimes}$	Policy and procedure manual review	Ц	Previous compliance documented
	<u> </u>	Needs improvement	Щ	Sample of facility records reviewed	\boxtimes	Other (specify):
	_	Non-compliant	\bigsqcup	Sight confirmation by inspector		
		Not reviewed	\boxtimes	Verbal confirmation by facility staff		
		ents: A nondenominational servicelltations).	се	and Bible Study are held each wee	ek ((inmates are also afforded individua
DO	C 3			s that may be kept on an inmate's person o es are consistently applied throughout the jail.		the cell.
CON	MPI	LIANCE \	/EF	RIFICATION		
	X	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
		Needs improvement		Sample of facility records reviewed		Other (specify):
Ī	Ī	Non-compliant		Sight confirmation by inspector		
Ī	Ī	Not reviewed	ī	Verbal confirmation by facility staff		

Comments:

DOC	350.32 (4) Conducting criminal backg	rou	nd checks on members of a religious organi	zation and clergy.		
COM	IPLIANCE	VEF				
	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented		
	Needs improvement		Sample of facility records reviewed	Other (specify):		
	Non-compliant		Sight confirmation by inspector			
	Not reviewed		Verbal confirmation by facility staff			
Com	Comments:					
DOC	DOC 350.32 (5) Orientation and training on facility operations for all volunteers.					
	 Documentation of the orientation and 	volu	unteer agreement is on file.			
COMPLIANCE VERIFICATION						
		\boxtimes	Policy and procedure manual review	Previous compliance documented		
	Needs improvement	H	Sample of facility records reviewed	Other (specify):		
	Non-compliant	Ħ	Sight confirmation by inspector			
	Not reviewed	H	Verbal confirmation by fracility staff			
		ш	verbal committation by facility stan			
Com	ments:					
DOC	350 33 Pecreation The jail shall have	no	licies and procedures relating to recreation.			
DOC	350.55 Recreation. The jail Shall have	po	nicles and procedures relating to recreation.			
DOC	350.33 (1) Identification of the recreat	ona	al activities that are available.			
DOC	350.33 (2) Schedule of recreational ac	tivi	ties.			
COM	PLIANCE	VEF	RIFICATION			
	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented		
	Needs improvement		Sample of facility records reviewed	Other (specify):		
	Non-compliant	\boxtimes	Sight confirmation by inspector			
	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff			
Com	ments: Recreation is limited to dayr	001				
COIII	ments. Reoreation is infined to day	001	Tradivido.			
DOC	350.33 (3) When and where available,	at l	east one hour of daily exercise and recreation	n is outside the cell or outdoors.		
COM	IPLIANCE	VEF	RIFICATION			
		X	Policy and procedure manual review	Previous compliance documented		
<u>_</u>	Needs improvement	$\stackrel{\square}{\sqcap}$	Sample of facility records reviewed	Other (specify):		
	Non-compliant	\forall	Sight confirmation by inspector			
	Not reviewed	H	Verbal confirmation by fracility staff			
		Ш	verbal committation by facility stail			
Com	ments:					
DOC	350 34 Publications The jail shall have	o n	olicies and procedures relating to access to	nublications		
D 00	330.34 Tublications. The jan shan hav	c p	oncies and procedures relating to access to	publications.		
DOC	350.34 (1) Provision of publications of	f ge	neral interest for inmates such as books, ne	wspapers and magazines.		
DOC	350.34 (2) Identification of publication	s th	at are prohibited for inmates because their	content creates a security risk.		
	 Reading material restrictions are post 	ed o	or otherwise accessible to inmates.			
DOC	350.34 (3) Inspection of publications b	orou	ight by visitors for inmates if the jail allows	risitors to bring in reading materials.		
	 There are limitations on the volume of enforced consistently throughout the j All reading materials allowed to be brown. 	ail.	rsonal reading materials that can be kept in the nt in by visitors are subject to search.	housing area, and these limitations are		

DEPARTMENT OF CORRECTIONS
Office of Detention Facilities
DOC-2744 (4/2015)

	of Detention Facilities 2744 (4/2015)				
COMPL	IANCE	VER	RIFICATION		
	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed	\boxtimes	Other (specify):
	Non-compliant	\boxtimes	Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
DOC 3			reading materials on a weekly bas		d use of canteen, vending or other similar
DOC 35	50.35 (1) Canteen shall be mad		-	-1	
			ricted by the facility based upon inmate	ciass	ification or status.
COMPL	IANCE	VER	RIFICATION		
	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed	\boxtimes	Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
			FOOD SERVICE		
			and quality food for all inmates.	compl	eted and maintained in the facility files.
COMPL	IANCE	VER	RIFICATION		
	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement	\boxtimes	Sample of facility records reviewed	\boxtimes	Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
inspec and no	ction (which is cycled throu utritional needs are approp	igh every riate. It v		jistere oric in	
	enting that the food service ar	ea meets l		n by a	quamica, macpenaem cutsiae source
COMPL	Meets standard	VER			Provious compliance documented
$- \stackrel{\triangle}{\vdash}$	Needs improvement		Policy and procedure manual review Sample of facility records reviewed	⊢⊢	Previous compliance documented
- $ otherwise$	·		•		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Comme	ents: The Jail's full-productio	n Kitcher	was inspected by the Marathon C	ounty	Health Department on 5/18/17.

Office of Detention Facilities DOC-2744 (4/2015) DOC 350.11 (4) Internal monthly inspection of the food service area is completed and documented. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: A spot check of records verified compliance. DOC 350.11 (5) The kitchen area and all equipment are maintained in a sanitary condition. Routine inspections are completed and documented. **COMPLIANCE VERIFICATION** Policy and procedure manual review Meets standard Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: As previously noted, the floors of the cooler and dry storage room were in need of cleaning (addressed subsequent to the inspection). DOC 350.11 (6) Three nutritious meals are provided daily, two of which are hot. Variations may be allowed based on weekend and holiday food service demands, provided basic nutritional goals are met. **COMPLIANCE VERIFICATION** Policy and procedure manual review Meets standard Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: DOC 350.11 (7) Food temperatures are properly maintained. Documentation of daily food preparation temperatures is maintained. Documentation of periodic serving temperature readings is maintained. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Daily temperature logs were observed. DOC 350.11 (8) Food items are stored appropriately at least 6 inches off the floor. Opened food packages are stored in airtight containers that are labeled and dated. Food items are stored in appropriate locations and temperatures. Documentation of daily cooler and freezer temperatures is maintained. **COMPLIANCE VERIFICATION** Previous compliance documented Meets standard Policy and procedure manual review Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: A spot check of food storage verified general compliance; however, not all food products were properly

dated.

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DOC 3	350.11 (9) Special diets are provided as	s p	rescribed by a qualified health care profess	sio	nal.		
•	Documentation of special diet orders is	s m	aintained.				
COMP	PLIANCE V	/EF	RIFICATION				
	Meets standard	X	Policy and procedure manual review		Previous compliance documented		
	Needs improvement	Ħ	Sample of facility records reviewed	Ħ	Other (specify):		
一百	Non-compliant	Ħ	Sight confirmation by inspector		Carter (cpccary)		
一百	Not reviewed	$\overline{\square}$	Verbal confirmation by facility staff				
Comm	ents: Special diet order forms were	e c	· · ·				
	provide a substitute from other availa		any foods that violate the inmate's religion. e foods from the menu served at the meal.				
COMP	PLIANCE V	/EF	RIFICATION				
	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented		
	Needs improvement		Sample of facility records reviewed		Other (specify):		
	Non-compliant		Sight confirmation by inspector				
	Not reviewed		Verbal confirmation by facility staff				
Comm			chen who prepare or serve food shall bath				
DOC 3	350.11 (12) No person who is known to bood handler in a facility. 350.11 (13) All persons who work in fo	od	e infected with any illnesses transmittable k service areas shall wear clean garments an nandling of food, drink, utensils or equipme	nd	clean caps or hairnets and shall keep their		
COMP	PLIANCE V	/EF	RIFICATION				
	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented		
	Needs improvement		Sample of facility records reviewed		Other (specify):		
	Non-compliant	\boxtimes	Sight confirmation by inspector				
	Not reviewed	\boxtimes	Verbal confirmation by facility staff				
Comm	ents: Inmate workers were observ	ed	in clean uniforms and wearing gloves	/ha	air nets.		
DOC 3	350.11 (14) Inmate workers are provide Documentation of orientation and train		orientation and training prior to assignment is maintained.	t in	the kitchen area.		
COMP	PLIANCE V	/EF	RIFICATION				
	Meets standard	\boxtimes	Policy and procedure manual review	\neg	Previous compliance documented		
	Needs improvement		Sample of facility records reviewed	╡	Other (specify):		
ᅮ	Non-compliant	H	Sight confirmation by inspector		Curon (apoonly).		
\dashv	Not reviewed	$\frac{\square}{\square}$	Verbal confirmation by facility staff				
Comm	nents:		torsal committation by facility stair				

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ver N	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff Sted from contamination. Meals are cove IFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff	red	Previous compliance documented Other (specify): during transit to and within the facility Previous compliance documented Other (specify):
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VER	Sight confirmation by inspector Verbal confirmation by facility staff Ited from contamination. Meals are cove IFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector	red	during transit to and within the facility Previous compliance documented
VER	Verbal confirmation by facility staff Leted from contamination. Meals are cove IFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector	red	Previous compliance documented
VER	ted from contamination. Meals are cove IFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector	red	Previous compliance documented
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	Sample of facility records reviewed Sight confirmation by inspector		•
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۵.۰.	washing equipment temperatures are rou	ıtine	ely monitored and documented.
VFR	IFICATION		ny momorou ana accamomou.
			Previous compliance documented
$\frac{\square}{\square}$		_	•
\vdash			Other (specify):
e ob:	served.		
overe	ed, emptied daily, and are kept clean.		
VER	IFICATION		
\boxtimes	Policy and procedure manual review		Previous compliance documented
П	Sample of facility records reviewed		Other (specify):
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	Sight confirmation by inspector		
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d sei	Verbal confirmation by facility staff		
	Verbal confirmation by facility staff parately from food service items.		
VER	Verbal confirmation by facility staff parately from food service items. IFICATION		Dravious compliance documents d
	Verbal confirmation by facility staff parately from food service items. IFICATION Policy and procedure manual review		Previous compliance documented
VER	Verbal confirmation by facility staff parately from food service items. IFICATION Policy and procedure manual review Sample of facility records reviewed		Previous compliance documented Other (specify):
VER	Verbal confirmation by facility staff parately from food service items. IFICATION Policy and procedure manual review		·
	vere	Sight confirmation by inspector Verbal confirmation by facility staff observed. Divered, emptied daily, and are kept clean. VERIFICATION	Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff cobserved. Divered, emptied daily, and are kept clean. VERIFICATION

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DOC 350.11 (20) A security procedure is in place to control and account for sharps, tools and utensils at all times.								
Documentation of daily control and inventory is maintained.								
COMPLIANCE	VERIFICATION							
Meets standard	Policy and procedure manual review Previous compliance documented							
Needs improvement	Sample of facility records reviewed Other (specify):							
Non-compliant	Sight confirmation by inspector							
Not reviewed	∀erbal confirmation by facility staff							
Comments: A daily accountability log was observed (sharps are stored in								